

Assessment of Language Abilities in Migrant and Nonmigrant Hispanic Students

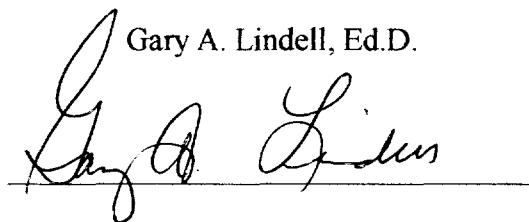
An Honors Thesis (SPAA 492)

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A handwritten signature in cursive script, reading "Gary A. Lindell", is written over a horizontal line.

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INTRODUCTION

There are increasing numbers of multicultural and multilingual students in the school population. However, according to ASHA (1985) only 1% of the nation's ASHA members were proficient enough in a foreign language to provide services to speakers of a foreign language. A national survey (Roseberry-McKibbin & Eicholtz, 1994) stated that only 23.6% of the respondents reported training in multicultural issues and only 10% spoke another language with enough fluency to conduct assessment and treatment in that language. It is suggested that speech-language pathologists are required to provide services to a population for which they are undertrained, lacking an availability of assessment tools, and have little or no access to other bilingual/bicultural professionals.

In addition, there is a large portion of the minority populations, namely Hispanics, that migrate several times during the year to follow the harvest. This adds another dilemma for speech-language pathologists. Not only is it difficult to conduct a nonbiased assessment of limited English proficiency (LEP) students, but they also must provide any necessary services to students who may only remain in that school system for a few months each year. This presents a problem with implementing any type of language therapy program and raises questions concerning the chances of long-term improvement.

REVIEW OF LITERATURE

The literature in the area of migratory and nonmigratory Hispanic students' language is divided into two main categories. The first consists of reliability and validity in language assessment of limited English proficient (LEP) students. The second category is comprised of issues related to the migration of the students throughout the school year. Both areas are controversial and require much more research.

Roseberry-McKibbin and Eicholtz (1994) report that 90% of the school SLP's responding to a survey said that they were not fluent enough to provide services in that language. The ethnic group most commonly served by these clinicians is Hispanic. According to Shewan and Malm (1992), cited by Roseberry-McKibbin and Eicholtz, "...the rate at which minorities have been entering the professions of speech pathology and audiology has not equaled the growth rate of the nation's majority population." According to Friedman (1996), by the year 2030, Hispanics will comprise 18.9% of the U.S. population. He also predicts that by the year 2050, 24.5% of the population will be Hispanic.

Assessment of LEP Hispanic Students

Adler (1990) explores the reliability, relevance, and validity of test data used with multicultural clients. One question he raises concerning reliability is examiner familiarity. He investigates whether there is any difference in respondent performance when the degree of familiarity between the administrator and respondent is well developed, casual, or essentially minimal. According to Fuchs and Fuchs (1989), cited by Adler, "Black and Hispanic children scored significantly and dramatically higher with familiar examiners." This suggests that because the examiner is frequently unfamiliar to the examinee, this factor could be contributing to significantly low performance and may increase the likelihood that these children will be identified inaccurately as handicapped.

Therefore, Adler suggests that an effort be made to establish an adequate and relaxed relationship during the assessment.

Adler (1990) also raises several issues to consider when conducting bilingual testing. It is necessary to distinguish between problems in English and the native language. First, it is important to look at how English differs from the child's native communication system in regard to phonology, lexicon, grammar, pragmatics, prosody, and body-language. Second, Adler questions how one distinguishes between disorder and difference in the native language. Third, he asks how one obtains, trains, and pays qualified interpreters to assist with the evaluation.

Adler asserts that the way many studies classify subjects is not relevant to the data. For example, many authors divide the subjects into social classes and then subdivide them often depending on factors such as the father's income, education, and occupation.

He suggests that these are not the real issues in which researchers are interested. Adler submits that he is more interested in the environment of the children in terms of degree or lack of organization in the home, presence of cognitive and linguistic stimulation in the home, and the enhanced or minimal motivation of the child in the upper-lower-class and the lower-lower-class homes. He says that it is incorrect to homogenize all economically poor subjects and doing so may affect the results. He also thinks it necessary to include information on the mother because that may be the most crucial determinant of the type of home environment in which the child is reared. However, it is frequently ignored.

Adler also discusses the validity of the standardized tests used to assess bilingual students. The standardized tests must be representative of the various cultures and regions of the country to be valid. Due to cost, time, and effort many of the standardized tests do not represent the entire nation. Therefore, the validity should be analyzed before accepting any data. Adler emphasizes the need to evaluate the reliability, relevancy, and validity of any type of assessment of multicultural students.

Gavillan-Torres (Miller et al., 1984) states that assessing limited-English-proficient (LEP) students prevents several problems. The first problem is determining if a bilingual or monolingual student has communication and learning problems due to their inability to perform in the English language. The second problem is choosing assessment tools which are appropriate to measure bilingual or monolingual children's language. The third problem is identifying assessment tools which can help administrators distinguish a second-language acquisition problem from a real handicap.

Gavillan-Torres lists six different standardized tests for speech/language development that have a Spanish version. However, even these tests are controversial in regards to their validity. Generally, professionals use a variety of methods to assess LEP students rather than a single group of tools. They often combine standardized tools that are useful in their experience, commercial bilingual assessment tools, and often locally developed Spanish/English language screening and placement tests. This is often followed by an interview with the parents and at times informal observations of the child's interactions. Language is comprised of content, form, and use. Therefore, the child must be observed in different settings in order to describe the child's language learning processes. The author submits that bilingual educators must realize that the education success of Hispanic LEP minority children will depend upon the opportunities the child receives through schooling to understand, hear, and digest or assimilate the contents of the language used in classrooms and the language used in tests. Also, bilingual educators and researchers must realize that language assessment tests used to determine the degree of bilingualism and the extent of handicap in LEP students are limited.

Several other studies give guidelines for the language assessment of LEP students. Kayser (1989) gives a framework for assessing Spanish-English speaking students. She suggests first determining the language status (the language in which the child is most proficient) of the child. This may vary depending on the area and manner of language

being tested. Although language dominance tests have their faults, they are required to be administered. However, it is necessary to supplement these scores with other data. This data could consist of a language sample, observation of language use, and language use questionnaires which help the respondent to describe the child's language use in a variety of social and linguistic contexts. There are several published questionnaires available for both teachers and parents.

Wilcox and Aasby (1988) present normative data for the Spanish version of the Test for Auditory Comprehension of Language (TACL). The purpose of the study is to compare the performance of bilingual and monolingual Mexican children on a standardized test. The authors wanted to see if second language acquisition affects the native language learning. They also compared socioeconomic status and type of education. They sampled sixty Spanish speaking, native Mexican children. Ten male and ten female subjects made up each of three age groups ranging from 4:0 to 8:11. Ten subjects from each of the age groups was from a high socioeconomic status (SES) and attended an English only private school. All of the 4-year-olds were preenrolled kindergartners at the same private school, however, they had not had extensive English exposure. The remaining children were from a low SES and were selected from a government orphanage. They had not been exposed to routine use of English. The instructions were presented by a tape recorded 30-year-old Mexican female who was a life-long resident of the same area of Mexico as the subjects.

First, the study revealed an age-related increase in scores across all age groups. This suggests that the Spanish version of the TACL is measuring a developmental aspect of language ability in all of the participants. Second, the high SES bilingual speakers outperformed the lower SES, monolingual speakers across all age groups with a significant difference in two of the three age groups. It seems that exposure to a second language did not obstruct development of the first language for these children. As these children were enrolled in school and their exposure to English increased, their Spanish

TACL scores increased significantly relative to their age peers. Comparison of the age group scores show that "the children made a marked increase in syntactic and morphologic auditory comprehension abilities following their enrollment in school, regardless of the language of instruction" (Wilcox & Aasby, 1988). It appeared that the increase in scores in relation to age could be because of increased schooling rather than the language of instruction. The authors suggest that this has implications in the early language facilitation programs. They also state that the data from this study should be used with caution due to the small sample size.

Roseberry and Connell (1991) introduce another method of differentiating between normal and language-impaired Spanish-speaking children. The authors in this study made the assumption that Specific Language Impaired (SLI) children can be differentiated from normal children by their style as well as their rate of language learning. The authors cite an earlier study by Connell (1987) which showed that "SLI children displayed difficulty learning an invented morpheme through a modeling teaching procedure compared to normal children, but no comparative difficulty learning through an imitation teaching procedure."

The subjects consisted of 26 Hispanic children of Mexican descent between the ages of 4:5 and 6:4 who resided within California's Central Costa County school district. Spanish was the primary language spoken in their homes. They all scored within normal limits on the Test of Nonverbal Intelligence (TONI) and had normal hearing. They were divided into two groups, normal and SLI, based on test scores and recommendations.

The subjects were taught the invented rule morpheme /ə/ using the modeling method only since that is the obvious differentiation. They were then tested for ability to use the morpheme according to the rule using simple pictures. The extent of learning was represented by the percent correct scores on the probes administered during the testing. Each child received two scores (two sessions). Most of the SLI children received a score of zero for both sessions. The normal children evidenced significantly higher percent

correct scores than the SLI group. These results show that this procedure did significantly differentiate between normal and SLI children. However, the authors discussed a few limitations. First, it did not differentiate every child. There was a little overlap between groups. Second, this procedure focused only on morphology which leaves open the possibility that the learning patterns might be different if lexical or syntactic learning were involved. Third, this procedure was designed for children who have attained some English, specifically a small set of lexical items. Overall, they felt this method could be used to differentiate some difficult to assess children but should be done with caution.

Cummins (Samuda et al., 1991) suggests that educators should distinguish between the acquisition of conversational skills and those skills required for academic success. He cites his previous study (1984) where the results showed that psychologists often failed to take into account the difference between these two aspects of proficiency. Since the students often appeared to be fluent in English due to their conversational skills, there was a tendency to assume that they had overcome all language problems and that the results of IQ tests administered in English were valid. However, Cummins states that native-like levels in conversation are approached in about two years of exposure. In contrast, academic proficiency appears to occur in a period of at least five years, on the average. This may result in an underestimation of minority students' academic potential for at least five years. Cummins also suggests that students with a solid language foundation in their native language are more likely to transfer those skills to a second language. He submits that if parents want their children to succeed in full bilingualism, they should expose their children to a rich linguistic environment in their native language.

According to Miller (1984), a bilingual child's communicative competence is a result of the child's exposure to the languages involved. It is affected by where the child heard them, who was using them, why they were being used, and how they were being used.

Therefore, neither language one nor two are "pure" but are along a sliding scale between them. The use of language may vary according to the context. This should be recognized in assessment. Miller also states that there is a tendency to call "different" "disordered". Several points to consider are stressed, such as: (a) being aware of normal acquisition patterns, both universal tendencies and the individual processes, (b) keeping in mind that acquisition and use must be measured in relation to the child's own linguistic environment and how it functions, and (c) being clear on the purpose of the assessment and remediation.

Mattes & Omark (1984) state that LEP students who are able to communicate normally in their native language do not have language disorders and are not appropriate candidates for remediation. They give several factors to consider when assessing bilingual students for possible language disorders. First, the bilingual child's language performance should be compared to that of other bilingual speakers who have had similar cultural and linguistic experiences. Bilingual children are a heterogeneous group in terms of their exposure and functional opportunity for use of their two languages in various settings. Bilingual children have often had fewer opportunities to hear and use English than children where only English is spoken in the home. Therefore, it is expected and normal that the second language children perform at a lower level of English proficiency than typical monolingual English speaking children. A child should be considered to have a language disorder only if his language behaviors are atypical of peers from the same cultural group who speak the same dialect and have had similar opportunities to hear and use the language.

The second factor the authors give is that grammatical errors in the second language that are similar to those observed among first language learners are to be expected and must not be viewed as evidence of a disorder. Studies have provided evidence that second language learners progress through an ordered series of stages in the acquisition of grammatical structures in the second language. Evidence also shows that second

language learners from a variety of language backgrounds acquire groups of language structures in a fairly set order. Dulay et al. (1982), as cited by Mattes & Omark, describes the acquisition order of 13 English grammatical morphemes. In the assessment of bilingual children, it must be recognized that many of the errors by second language learners may be similar to those of monolingual English speakers with delayed language development. Therefore, proficiency in the minority language should also be examined.

A third factor is that language loss is a normal phenomenon when opportunities to hear and use the first language are withdrawn or minimized. A loss of proficiency often takes place in the first language as the child acquires proficiency in a second language. LEP children who experience a language loss in their first language may demonstrate language test scores similar to those of bilingual children with language disorders. It is necessary to have a detailed case history and an analysis of which language is used in various speaking contexts to avoid labeling a child with a language loss as language disordered.

The final factor to consider is that shifting from one language to another within utterance is not necessarily an indicator of language confusion or a language disorder. Linguistic borrowing occurs when a person uses a single word or phrase that may have been first encountered with persons of another culture or language. Code Switching involves alternating between the two languages. One sentence may contain several shifts. Mattes & Omark cite that Dulay et al. (1982) found that code switching typically occurs at specific syntactic boundaries and maintains the internal structural consistency of the utterance. It is common among individuals who have acquired nativelike fluency in two languages and should not be considered abnormal.

Mattes & Omark suggest three methods for collecting assessment information. The first method is through standardized tests. They can be used to compare the performance of one child to that of others in specific aspects of the spoken language. However, there are not always standardized tests with an appropriate normative sample. Children with

communication disorders can be identified without standardized tests if their language behavior is observed systematically and compared to that of peers with similar language experiences. The second method is nonstandardized instruments. This refers to criterion-referenced tests and other informal measures such as observational checklists. The third method is natural communication samples. Performance on formal and informal tests should always be compared to natural conversation because this is how the child communicates in real life situations.

Assessment of Migrant Hispanic Students

Coballes-Vega & Salend (1988) introduce guidelines for assessing migrant handicapped students. The authors state that "the nomadic lifestyle of migrants seriously hinders their access to and the continuity of appropriate educational services. As a result, migrant handicapped students are both underidentified and underserved." They describe several ways to assess the unique needs of the migrant student.

First, identify the student's language background. The language background of bilingual students is typically assessed through an assessment instrument, an interview, or information provided in the student's file. However, this information can be limited. If the student appears to function in both languages to varying degrees, the testing may need to be administered in both the primary language and English. One step in assessing the migrant student is obtaining information on the child's language use at home. This can be done through observations or interviews by answering questions pertaining to the following: (a) the language/dialect spoken by the parents, (b) the language/dialect spoken by the student and siblings, (c) the language/dialect used in the family's speech community, (d) any distinctions made among the uses of the primary language or dialect and English, (e) if so, how the division is made, and (f) the student's language preference in the home and community. A second step helps educators to identify the student's language preference in school by addressing questions concerning the following: (a) if

the student was born in the U.S., (b) if not, how long he has been living here, (c) if the student's language dominance been identified, (d) if the student's language of instruction has always been English, (e) if the student interacts with peers in the primary language or the secondary one, (f) the student's ability to engage in simplified interactions with school personnel, and (g) the student's ability to answer basic questions relating to self, family, health, and school. After these questions have been answered, the student's language functioning can be more accurately assessed.

The next guideline given by Coballes-Vega & Salend is to consider the student's cultural background. An educator may misinterpret behavior that is acceptable in the child's culture as being deficient or abnormal. Witkin et al. (1972), cited by Coballes-Vega & Salend, defined two types of cognitive styles related to cultural background. They are field-independent and field-sensitive. Field-independent children show a preference for working independently, are task-oriented, and are more independent of external judgment. Field-sensitive students are more concerned about the external environment, are more sensitive to doubt or support from others, and work well in cooperative settings. In Witkin's research, Mexican-American students exhibited field-sensitive behaviors where Anglos tended to show field-independent behaviors. While these cognitive style are important to consider, caution should be exercised any generalizing a behavior to any cultural group.

A third guideline Coballes-Vega & Salend submit is to examine adaptive behavior. Adaptive behavior measures the child's ability to adjust to the social and cultural demands of their environment. This is important for migrant students because it measures domains outside of the educational setting. The lifestyle of migrant children provides them with a range of experiences and creates a demand for them to perform a variety of roles that may differ from their nonmigrant peers. However, adaptive behavior should be interpreted with caution because the instruments are based on a cultural perspective of adaptive behavior and are not free of cultural bias.

Coballes-Vega & Salend also suggest using the Migrant Student Transfer System (MSRTS). Educators can obtain information about the student's school history and previous testing. This information can be helpful in interpreting assessment findings. The MSRTS is a nationwide computerized communication system based in Little Rock, Arkansas. It contains the health and academic records for more than one-half million migrant students in the United States. Recently, information has been added concerning any special education services provided. It includes prior information relating to the handicapping condition, testing, related services provided, and the Individual Education Programs (IEP). There is information available for obtaining a more detailed history. If the MSRTS is not available in the student's file, school personnel can request a copy from the local Migrant Education Center or the state education department. School personnel should contact MSRTS to begin a file if there is not an existing one.

The next guideline is to determine the student's medical needs. Guerra (1980), Michael & Salend (1985), and Ramirez (1977) are cited by Coballes-Vega & Salend indicating that their research shows that migrant students have a high incidence of medical and health problems that can interfere with learning. An assessment should include the migrant student's medical, physical, visual, dental, auditory, nutritional, and immunization needs.

Coballes-Vega & Salend suggest that parents should be involved in the assessment process. Conferences and interviews should be in the language that is easily understood by the parents. Any communication to the parents should be in the language with which they are comfortable. Whenever possible, information from school to home should be communicated verbally as well as in writing since some parents may have problems reading. Consider the parents' transportation needs and work schedule when planning meetings, especially during the picking season. School personnel should teach parents to share information such as the IEP with personnel in the child's new school.

Another guideline is to interview the student's teachers. Many migrant families follow the same nomadic pattern every year, therefore, it is beneficial to talk to previous teachers. Interviewing previous teachers may yield information about the student's academic, socialization, and behavioral abilities from the viewpoint of someone familiar with the student. Some possible questions during the interview pertain to the following information: (a) the areas in which the student excels and has difficulty, (b) the approaches or materials that have been successful and unsuccessful with the student, (c) how the student's behavior is managed, (d) any physical problems (i.e., speech, hearing, vision, health, motor) that may be affecting the student's performance, and (e) the student's attitude toward school and self.

The next guideline is choosing appropriate assessment instruments. Some areas to consider in evaluating assessment instruments are: (a) the prerequisite skills are needed by the student to complete the test, (b) availability of the test in the child's primary language as well as in English, (c) the appropriateness of the vocabulary level of the test, (d) the presentation and response modes of the test items, (e) any test biases, and (f) whether or not the test is motivating.

Coballes-Vega & Salend advise employing curriculum-based assessment. This may help with designing the IEP and also help teachers monitor student progress and change instructional techniques.

Finally, the authors suggest establishing a network of community resources. Educators should be aware of the supportive organizations, agencies, institutions, and resources in the community. They may be able to assist in some needs identified during the assessment process.

Velazquez (1990) has been an administrator of a retrieval program for migrant seasonal farmworker school dropouts. She cites Hodgkinson (1985) and Dement (1985) saying that "migrant and seasonal farmworkers are the most educationally disadvantaged group in our society". The public has overlooked this population. Velazquez quotes

Brewer & Richards (1988) saying "the constant interruption of the educational process leads to confusion, frustration and a feeling of alienation". Velazquez says that the alienation is the major factor for becoming school dropouts. Velazquez also cites Hodgkinson (1985) for saying "Statistics reveal that over 70 percent of the migrants have not completed high school and 15 percent are functionally illiterate". Finally, Velazquez quotes Prewitt-Diaz as saying that "the culture of migrancy fosters its own continuance and is, in many ways, counterproductive to education".

IMPLICATIONS FOR CHANGE/CONCLUSIONS

The literature on assessing the language abilities of migrant and nonmigrant Hispanic children offers many guidelines but few definite answers. Assessing language abilities in these children encompasses a broad range of areas including cultural, social, and academic differences. There is no one test that can tell a professional if an LEP student is in need of services. No one area can be assessed without considering the others. It appears from the literature that many Hispanic children's needs are not being met according to the Public Laws. This is due to lack of training and availability of resources. Much time must be invested in following the guidelines suggested in the literature. Many professionals do not feel they have time available to do such extensive and time consuming data gathering due to their large caseloads. In many cases, the migrant students will be gone before all the information could be gathered and a remediation program implemented. According to Roseberry-McKibbin & Eicholtz (1994), most of the Speech-Language Pathologists surveyed did not even have the skills necessary to conduct such thorough diagnostics. I conclude that as Speech-Language Pathologists, we are neglecting an entire population for which we are responsible. I submit that the American Speech and Hearing Association (ASHA) needs to make extensive study in a second language a requirement for certification. A Master's Degree is required to be licensed which normally takes about two years in addition to four years of undergraduate work. ASHA could require that at least six semesters of foreign language be completed. Many schools already require at least two semesters. This would not add many more hours to the student's workload and could take the place of some electives. A new generation of Speech-Language Pathologists would be certified with at least a strong foundation in a second language.

In addition, university programs need to place more emphasis on assessing and treating multicultural and bilingual students. I think that many universities in a basically

homogeneous community overlook this aspect because it does not seem immediately relevant. However, I suggest that these programs are doing a great disservice to their students. Many of the students will move on to other regions of the country where it will be assumed that they have the qualifications to treat LEP students. However, for many SLPs it would be unethical to provide this service since they are undertrained and unqualified. This puts both the administration and the SLP in a bad situation. It is required by law that the needs of these children be met.

This leads to implications for the administration. Speech-Language Pathology is still a relatively new field and may be viewed by some administrators as less important than the traditional services provided by the schools. Administrators, as well as fellow educators, need to receive more education on the significance of language ability and its relationship to the more traditional aspects of education. This could be done through more in-school workshops for teachers and administrators. It can also be increased through collaborative learning where the SLP teaches various aspects of language to an entire classroom. This would help the students and teachers to see how we can help with language skills such as following directions and finding the main idea/details in a reading passage.

In addition, Speech-Language Pathologists must take responsibility for their own lack of adequate training in certain areas. They can do this through continuing education opportunities. I submit that too many SLPs only do what is required to maintain their certification and no more. It is important for SLPs to take advantage of opportunities such as state and national conventions, local and state workshops, as well as speech and language journals to keep abreast of new information and ideas.

Finally, it is obvious from the literature that there is much need of further research in this area. It is likely that there is a lack of research because of the lack of training in this area. Most of the research seems to be done by a small group of professionals. Hopefully, as more professionals work toward improving their education in this area,

there will be more interested SLPs qualified to do research concerning LEP students. I submit that the more students see the faculty of their university actively involved in research as well as supervisors/peers in the workplace, the more likely they are to undertake a research project themselves. This is an essential step in meeting the needs of all children regardless of language or disorder.

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